COMBINED DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Easy Slip Fit Shoe

the specification of which: (check one)

	REGULAR	OR DESIGN APPLICATION			
M	is attached hereto.				
The state of the s	was filed on as application Serial No and was amended on (if applicable).				
	PCT FILED APPLICA	ATION ENTERING NATIONAL S	STAGE		
	was described and claimed in International application No filed on (if any),				
	and as amended on	(if a	ny).		
1 hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.					
I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, §1.56.					
	PRIORITY CLAIM				
I hereby claim foreign priority benefits under 35 USC 119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed.					
PRIOR FOREIGN APPLICATION(S)					
Country	Applicati Numbe	on Date of Fili			
United Kingdom	0029505.5	4 December 20	00 Yes		
L					
(Complete this part only if this is a continuing application.)					
I hereby claim the benefit under 35 USC 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of 35 USC 112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37 Code of Federal Regulations \$1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application:					
(Application Se	rial No.) (Filing	Date) (Status-patenti	ed, pending, abandoned)		

POWER OF ATTORNEY

The undersigned hereby authorizes the U.S. attorney or agent named herein to accept and follow instructions from Marks & Clerk

as to any action to be taken in the Patent and Trademark Office regarding this application without direct communication between the U.S. attorney or agent and the undersigned. In the event of a change in the persons from whom instructions may be taken, the U.S. attorney or agent named herein will be so notified by the undersigned.

As a named inventor, I hereby appoint the following attorneys represented by Customer No. 000466 to prosecute this application and transact all business in the Patent and Trademark Office connected therewith: Robert J. PATCH, Reg. No. 17,355, Andrew J. PATCH, Reg. No. 32,925, Robert F. HARGEST, Reg. No. 25,590, Benoît CASTEL, Reg. No. 35,041, Eric JENSEN, Reg. No. 37,855, Thomas W. PERKINS, Reg. No. 33,027, and Roland E. LONG, Jr., Reg. No. 41,949, c/o YOUNG & THOMPSON, Second Floor, 745 South 23rd Street, Arlington, Virginia 22202.

Address all telephone c	alls to Young & Thompson at $703/521-22$	97.
made on information are with the knowledge the imprisonment, or both the false statements may jection.	statements made herein of my own knowled belief are believed to be true; and furth at willful false statements and the like sunder Section 1001 of Title 18 of the Unite opardize the validity of the application or	er that these statements were made o made are punishable by fine or ad States Code and that such willful
Full name of sole or firs (given name, family name	ne)	
Inventor's signature	Raymond Wells / Welk	Date 63-12-2001
Residence:	Imperia, Italy	Citizenship; British
Post Office Address:	Via Martíri Della Liberazione 31 18010 Dúano Castello Imperia, Italy	
Full name of second join (given name, family name)	nt inventor, if any: ne)	
Inventor's signature		Date
Residence:		Citizenship:
Post Office Address:	,	
Full name of third joint (given name, family nam		
Inventor's signature		Date
Residence:		Citizenship:
Post Office Address:		